

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW		2 10X52	10/30/00
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral) Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Final Original	Date
1	✓	8/19/00
2		✓
3		✓
4		✓
5		✓
6		✓
7		✓
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42	✓	
43	✓	
44	✓	
45	✓	
46	=	
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49	✓	
50	✓	

Claim	Final Original	Date
51	✓	8/19/00
52	✓	
53	✓	
54		
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57	=	00
58	✓	00
59	✓	00
60	✓	00
61	✓	00
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Claim	Final Original	Date
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If more than 150 claims or 10 actions  
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